

**Tennessee Department of Environment & Conservation  
Division of Solid Waste Management**

**SOLID WASTE  
SPECIAL WASTE APPROVAL PACKAGE**

This package contains two different applications that must be submitted to the TN Department of Environment & Conservation when an applicant pursues disposal of a Special Waste:

1. The **Solid Waste Special Waste Evaluation Application** (Submitted to the local Environmental Field Office (EFO) for review. For contact persons and addresses go to [www.tdec.net/efo](http://www.tdec.net/efo); and
2. The **Solid Waste Special Waste Evaluation Fee Worksheet**. Submitted with the appropriate fee to:

TN Department of Environment & Conservation  
Division of Fiscal Services  
Fee Collection Section – SWM  
14<sup>th</sup> Floor L & C Tower  
401 Church Street  
Nashville, TN 37243

Should you have any questions concerning the Special Waste Approval application contact the Environmental Field Office in your area as indicated in the above EFO link.



## **Waste Evaluation Application Package {Rule Reference 1200-1-7-.01(4)}**

The following documents are included in this Waste Evaluation Application Package:

1. Waste Evaluation Application
2. Waste Evaluation Fee Worksheet
3. Link to Environmental Field Office (EFO) Addresses ([www.tdec.net/efo](http://www.tdec.net/efo))

### **INSTRUCTIONS FOR COMPLETING WASTE EVALUATION PROCESS**

A separate application, worksheet and fee of \$250 must be submitted for each waste stream.

#### **I) Waste Evaluation Application**

1. Complete the Waste Evaluation Application. ALL topics/questions must be addressed and completed before the application can be evaluated.
2. Attach laboratory analysis of the waste as appropriate and/or applicable Material Safety Data Sheets to the Waste Evaluation Application.
3. Mail the completed Waste Evaluation Application to the proper FIELD OFFICE in the region of your proposed disposal/processing facility with mailing addresses provided from EFO link above. (Please remember that the fee and the completed fee form are mailed to a separate address as described below.)

#### **II) Waste Evaluation Fee Worksheet**

1. Complete the Waste Evaluation Fee Worksheet answering ALL questions.
2. Attach check for \$250 made payable to the Treasurer, State of Tennessee.
3. Mail check and Waste Evaluation Fee Worksheet to the address below:

State of Tennessee  
Department of Environment and Conservation  
Division of Fiscal Services – Fee Section – SWM  
401 Church Street 14<sup>th</sup> Floor -Tower  
Nashville, TN 37243



**TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF SOLID WASTE MANAGEMENT  
WASTE EVALUATION APPLICATION**

**PLEASE COMPLETE ALL QUESTIONS**

**Official Use Only**

**SPC ID #** \_\_\_\_\_

**1. GENERATOR INFORMATION.**

(A) Facility Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
Zip Code: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_  
(B) Physical Location: \_\_\_\_\_  
County: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_  
(C) Nature of Business: \_\_\_\_\_  
Technical Contact: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_

**2. UNDER TENNESSEE'S RULES GOVERNING HAZARDOUS WASTE MANAGEMENT, IS THE WASTE:**

	YES	NO
A) IGNITABLE? .....	<input type="checkbox"/>	<input type="checkbox"/>
B) CORROSIVE? .....	<input type="checkbox"/>	<input type="checkbox"/>
C) REACTIVE? .....	<input type="checkbox"/>	<input type="checkbox"/>
D) TCLP HAZARDOUS? .....	<input type="checkbox"/>	<input type="checkbox"/>
E) IS IT A LISTED HAZARDOUS WASTE? .....	<input type="checkbox"/>	<input type="checkbox"/>

Hazardous Waste Code(s): \_\_\_\_\_

**RULE 1200-1-11-.03(1)(b) - A person who generates a waste must determine if that waste is a hazardous waste.**

**3. NAME AND/OR DESCRIPTION OF WASTE:** \_\_\_\_\_  
\_\_\_\_\_

**4. WASTE CHARACTERIZATION.** Attach laboratory reports and/or material safety data sheets to adequately characterize the waste or explain why this is not necessary.

Describe any Special Handling Procedures: \_\_\_\_\_

pH (if applicable) \_\_\_\_\_ Radioactive (Y/N) \_\_\_\_\_

Flash Point (if applicable) \_\_\_\_\_ Infectious (Y/N) \_\_\_\_\_

Physical State: Solid ☐ Liquid ☐ Sludge ☐ Slurry ☐

Color: \_\_\_\_\_ Percent Solid: \_\_\_\_\_

Attachment Included (Y/N) \_\_\_\_\_

**5. DESCRIBE HOW WASTE IS GENERATED (Be Specific).**

(A)  
Rate of Waste "Generation": Quantity \_\_\_\_\_  
Type Units: Tons ☐ cy ☐ lbs ☐ Other \_\_\_\_\_  
(specify)  
Frequency of Generation: One Time ☐ Daily ☐ Weekly ☐  
Monthly ☐ Annually ☐ Other ☐ \_\_\_\_\_  
(specify)

(B)  
Rate of Waste "Disposal": Quantity \_\_\_\_\_  
Type Units: Tons ☐ cy ☐ lbs ☐ Other \_\_\_\_\_  
(specify)  
Frequency of Disposal: One Time ☐ Daily ☐ Weekly ☐  
Monthly ☐ Annually ☐ Other ☐ \_\_\_\_\_  
(specify)

**CONTINUED ON REVERSE**

5. (continued)

(C) Include a narrative and a flow diagram of the process that generates the waste. Your explanation must describe the **POTENTIAL** contaminants in the waste which should justify your scope of constituents in Item 3. Include attachments as necessary.

Attachment Included (Y/N)\_\_\_\_\_

**6. HOW IS WASTE PRESENTLY MANAGED?**

**7. DESCRIBE THE TYPE OF CONTAINER USED FOR TRANSPORT OF WASTE.**

Drums ☐ Roll-Off ☐ Container (dumpster, collector box) ☐ Plastic Bags ☐ Truck ☐ Other \_\_\_\_\_

**8. PROPOSED DISPOSAL / PROCESSING FACILITY. List only a facility that you have contacted and which has agreed to accept your waste if approved by the Department.**

(A) Facility Name: \_\_\_\_\_  
(B) Facility Permit Number: \_\_\_\_\_  
(C) Facility Operator / Contact Name: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_

**9. PROPOSED TRANSPORTER.**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_

**10. I hereby certify that the above information is true and accurate to the best of my knowledge.**

Waste Generator's Authorized Signature:

Preparer's Signature (If Different):

Date

Date

**Official Use Only**

Reviewer's Signature

Date Reviewed

Send originals with attachments to the Solid Waste Environmental Assistance Center for the region in which the facility listed in Item 8 above is located.



**TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF SOLID WASTE MANAGEMENT  
WASTE EVALUATION FEE WORKSHEET**

<b>1. DATE</b>	<b>Central Office Use Only</b> SPC ID # _____			
<b>2. GENERATOR</b>				
<p>(A) Name: _____ Address: _____ _____ Zip Code: _____ Phone: (_____) _____</p> <p>(B) Contact Person: _____ Title: _____ Phone: (_____) _____</p>				
<b>3. Amount Enclosed:</b> \$ _____	<b>4.</b> <input type="checkbox"/> New Application <input type="checkbox"/> Renewal			
<b>5. Name and Address of Waste Processing or Disposal Facility</b>				
<p>Name: _____ Address: _____ _____ Zip Code: _____</p>				
<b>6. Frequency of Disposal:</b> <input type="checkbox"/> One time <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually <input type="checkbox"/> Other _____ (specify)				
<b>Central Office Use Only</b>				
CD Number	Date Received	Amount	Receipt #	Comments

Send original with payment directly to the Central Office.

## **Special Waste Evaluation Fees**

The waste evaluation fee schedule for Solid Waste Processing and Disposal is found at [\*\*Rule 1200-1-7-.07\(2\)\(b\)4\*\*](#). For each waste stream application, a fee worksheet and fee of \$250 must be submitted.

### **Waste Evaluation Fee Worksheet Instructions**

1. Complete the Waste Evaluation Fee worksheet answering all questions.
2. Attach a check for \$250 made payable to the Treasurer, State of Tennessee.
3. Mail the check and Waste Evaluation Fee Worksheet to the address below:

State of Tennessee  
Department of Environment and Conservation  
Division of Fiscal Services – Fee Section – SWM  
401 Church Street, 14<sup>th</sup> Floor - Tower  
Nashville, TN 37243

Note: The [\*\*Waste Evaluation Application\*\*](#) must be mailed separately to the proper EAC Solid Waste Field Office in the region of your proposed disposal/processing facility. The [\*\*Waste Evaluation Fee Worksheet and attached fee\*\*](#) is mailed to the Division of Fiscal Services.